

COMMUNITY BENEFITS REPORTING FORM

Pursuant to RSA 7:32-c-1

FOR FISCAL YEAR BEGINNING 10/01/2013

to be filed with:

Office of the Attorney General
Charitable Trusts Unit
33 Capitol Street, Concord, NH 03301-6397
603-271-3591

fy 2014

Section 1: ORGANIZATIONAL INFORMATION

Organization Name Lamprey Health Care, Inc.

Street Address 207 South Main Street

City Newmarket **County** 08 - Rockingham **State** NH **Zip Code** 03857

Federal ID # 0237305106 **State Registration #** 1677

Website Address: www.lampreyhealth.org

Is the organization's community benefit plan on the organization's website? No

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

IF NO, please complete and attach the Initial Filing Information Form.

IF YES, has any of the initial filing information changed since the date of submission?

No **IF YES**, please attach the updated information.

Chief Executive: Gregory White 6036592494 gwhite@lampreyhealth.org

Board Chair: Audrey Ashton-Savage 6036592494 ashtonsav@aol.com

Community Benefits

Plan Contact: Anita Rozeff 6032927210
arozeff@lampreyhealth.org

Is this report being filed on behalf of more than one health care charitable trust? No

IF YES, please complete a copy of this page for each individual organization included in this filing.

Section 2: MISSION & COMMUNITY SERVED

Mission Statement: The mission of Lamprey Health Care is to provide high quality primary medical care and health related services, with an emphasis on prevention and lifestyle management, to all individuals regardless of ability to pay.

Has the Mission Statement been reaffirmed in the past year (*RSA 7:32e-1*)? Yes

Please describe the community served by the health care charitable trust. "Community" may be defined as a geographic service area and/or a population segment.

Service Area (Identify Towns or Region describing the trust's primary service area):

Lamprey Health Care has multiple sites and service areas. We have sites located in Newmarket, Raymond and Nashua.

Our medical facilities in Newmarket and Raymond, New Hampshire including a transportation program serve individuals from 29 communities in Rockingham and Strafford Counties. Our service area for medical care for Newmarket and Raymond centers consists of the following communities:

Atkinson, Barrington, Brentwood, Candia, Chester, Danville, Deerfield, Derry, Durham, Epping, Exeter, Fremont, Hampstead, Hampton, Kingston, Lee, Londonderry, Newfields, Newmarket, Newton, Nottingham, North Hampton, Northwood, Plaistow, Raymond, Rye, Sandown, Seabrook, and Stratham.

Our medical facility in Nashua, New Hampshire currently serves individuals from the greater Nashua area. The majority of the patients live in the downtown Nashua area - which has been federally designated as a Medically Underserved Population. The service area of Nashua Area Health Center - A Center of Lamprey Health Care consists of the following communities:

Amherst, Brookline, Hollis, Hudson, Greenville, Litchfield, Lyndeborough, Mason, Merrimack, Milford, Mont Vernon, Nashua, Pelham, and Wilton.

Service Population (Describe demographic or other characteristics if the trust primarily serves a population other than the general population):

Although Lamprey Health Care does serve the general population, a large percentage of Lamprey Health Care patients includes the uninsured, underinsured and indigent. In Calendar Year 2014, LHC served 16,169 patients though 65,442 visits at all three sites. Although Lamprey Health Care has seen a decrease in the number of uninsured patients, currently at 22%, due to the expansion of Medicaid and the implementation of the ACA, the number is still significant. The number of uninsured patients does not reflect the increasing number of patients with high deductible health plans. In addition, the percentage of patients with income 200% and below Federal Poverty Guidelines has continued to increase and is currently 78%, up 2% from 2013.

Section 3: COMMUNITY NEEDS ASSESSMENT

In what year was the last community needs assessment conducted to assist in determining the activities to be included in the community benefit plan?

2014. *(Please attach a copy of the needs assessment if completed in the past year)*

Was the assessment conducted in conjunction with other health care charitable trusts in your community? Yes

Based on the needs assessment and community engagement process, what are the priority needs and health concerns of your community?

| | NEED (Please enter code # from attached list of community needs) |
|---|--|
| 1 | 101 |
| 2 | 120 |
| 3 | 122 |
| 4 | 121 |
| 5 | 604 |
| 6 | 603 |
| 7 | 407 |
| 8 | 420 |
| 9 | 601 |

What other important health care needs or community characteristics were considered in the development of the current community benefits plan (e.g. essential needs or services not specifically identified in the community needs assessment)?

| | NEED (Please enter code # from attached list of community needs) |
|---|--|
| A | 300 |
| B | 100 |
| C | 123 |
| D | 350 |
| E | 430 |
| F | |
| G | |

Please provide additional description or comments on community needs including description of "other" needs (code 999) if applicable. *Attach additional pages if necessary:*

Section 4: COMMUNITY BENEFIT ACTIVITIES

Identify the categories of Community Benefit activities provided in the preceding year and planned for the upcoming year (note: some categories may be blank). For each area where your organization has activities, report the past and/or projected unreimbursed costs for *all* community benefit activities in that category. For each category, also indicate the *primary* community needs that are addressed by these activities by referring to the applicable number or letter from the lists on the previous page (i.e. the listed needs may relate to only a subset of the total reported costs in some categories).

| <i>A. Community Health Services</i> | <i>Community Need Addressed</i> | <i>Unreimbursed Costs (preceding year)</i> | <i>Unreimbursed Costs (projected)</i> |
|--|--|---|--|
| <i>Community Health Education</i> | 1 2 A | \$133,251.00 | \$80,000.00 |
| <i>Community-based Clinical Services</i> | 1 2 A | \$3,783,343.00 | \$3,000,000.00 |
| <i>Health Care Support Services</i> | 6 5 7 | \$753,711.00 | \$580,000.00 |
| <i>Other:</i> | -- -- -- | | |

| <i>B. Health Professions Education</i> | <i>Community Need Addressed</i> | <i>Unreimbursed Costs (preceding year)</i> | <i>Unreimbursed Costs (projected)</i> |
|--|--|---|--|
| <i>Provision of Clinical Settings for Undergraduate Training</i> | -- -- -- | | |
| <i>Intern/Residency Education</i> | -- -- -- | | |
| <i>Scholarships/Funding for Health Professions Ed.</i> | -- -- -- | | |
| <i>Other: Area Health Education Center (AHEC)</i> | A -- -- | \$150,123.00 | \$135,000.00 |

| <i>C. Subsidized Health Services</i> | <i>Community Need Addressed</i> | <i>Unreimbursed Costs (preceding year)</i> | <i>Unreimbursed Costs (projected)</i> |
|---|--|---|--|
| <i>Type of Service:</i> | -- -- -- | | |
| <i>Type of Service:</i> | -- -- -- | | |
| <i>Type of Service:</i> | -- -- -- | | |
| <i>Type of Service:</i> | -- -- -- | | |
| <i>Type of Service:</i> | -- -- -- | | |

| D. Research | Community Need Addressed | Unreimbursed Costs (preceding year) | Unreimbursed Costs (projected) |
|----------------------------------|---|--|---|
| <i>Clinical Research</i> | -- -- -- | | |
| <i>Community Health Research</i> | -- -- -- | | |
| <i>Other:</i> | -- -- -- | | |

| E. Financial Contributions | Community Need Addressed | Unreimbursed Costs (preceding year) | Unreimbursed Costs (projected) |
|--|---|--|---|
| <i>Cash Donations</i> | -- -- -- | | |
| <i>Grants</i> | -- -- -- | | |
| <i>In-Kind Assistance</i> | -- -- -- | | |
| <i>Resource Development Assistance</i> | -- -- -- | | |

| F. Community Building Activities | Community Need Addressed | Unreimbursed Costs (preceding year) | Unreimbursed Costs (projected) |
|---|---|--|---|
| <i>Physical Infrastructure Improvement</i> | 2 B -- | \$18,397.00 | \$300,000.00 |
| <i>Economic Development</i> | -- -- -- | | |
| <i>Support Systems Enhancement</i> | -- -- -- | | |
| <i>Environmental Improvements</i> | -- -- -- | | |
| <i>Leadership Development; Training for Community Members</i> | -- -- -- | | |
| <i>Coalition Building</i> | -- -- -- | | |
| <i>Community Health Advocacy</i> | -- -- -- | | |

| <i>G. Community Benefit Operations</i> | <i>Community Need Addressed</i> | <i>Unreimbursed Costs (preceding year)</i> | <i>Unreimbursed Costs (projected)</i> |
|---|--|---|--|
| <i>Dedicated Staff Costs</i> | -- -- -- | | |
| <i>Community Needs/Asset Assessment</i> | -- -- -- | | |
| <i>Other Operations</i> | -- -- -- | | |

| <i>H. Charity Care</i> | <i>Community Need Addressed</i> | <i>Unreimbursed Costs (preceding year)</i> | <i>Unreimbursed Costs (projected)</i> |
|---|--|---|--|
| <i>Free & Discounted Health Care Services</i> | 1 2 -- | \$1,495,116.00 | \$1,000,000.00 |

| <i>I. Government-Sponsored Health Care</i> | <i>Community Need Addressed</i> | <i>Unreimbursed Costs (preceding year)</i> | <i>Unreimbursed Costs (projected)</i> |
|--|--|---|--|
| <i>Medicare Costs exceeding reimbursement</i> | 1 2 -- | \$503,529.00 | \$500,000.00 |
| <i>Medicaid Costs exceeding reimbursement</i> | 1 2 -- | \$375,957.00 | \$300,000.00 |
| <i>Other Publicly-funded health care costs exceeding reimbursement</i> | 1 2 -- | \$0.00 | \$0.00 |

Section 5: SUMMARY FINANCIAL MEASURES

| <i>Financial Information for Most Recent Fiscal Year</i> | <i>Dollar Amount</i> |
|--|----------------------|
| <i>Gross Receipts from Operations</i> | \$12,129,918.00 |
| <i>Net Revenue from Patient Services</i> | \$6,833,089.00 |
| <i>Total Operating Expenses</i> | \$12,110,995.00 |
| | |
| <i>Net Medicare Revenue</i> | \$1,135,343.00 |
| <i>Medicare Costs</i> | \$1,226,170.00 |
| | |
| <i>Net Medicaid Revenue</i> | \$2,984,655.00 |
| <i>Medicaid Costs</i> | \$3,223,427.00 |
| | |
| <i>Unreimbursed Charity Care Expenses</i> | \$1,484,937.00 |
| <i>Unreimbursed Expenses of Other Community Benefits</i> | \$2,585,296.00 |
| <i>Total Unreimbursed Community Benefit Expenses</i> | \$4,070,233.00 |
| | |
| <i>Leveraged Revenue for Community Benefit Activities</i> | \$7,114,920.00 |
| <i>Total Community Benefits including Leveraged Revenue for Community Benefit Activities</i> | \$11,185,776.00 |

Section 6: COMMUNITY ENGAGEMENT in the Community Benefits Process

| <i>List the Community Organizations, Local Government Officials and other Representatives of the Public consulted in the community benefits planning process. Indicate the role of each in the process.</i> | <i>Identification of Need</i> | <i>Prioritization of Need</i> | <i>Development of the Plan</i> | <i>Commented on Proposed Plan</i> |
|---|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| 1) Families First Health and Support Center | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2) Lamprey Health Care | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3) SeaCare Health Services | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4) Seacoast Mental Health Center | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5) United Way of Greater Seacoast | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6) Exeter Health Resources | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7) Core Physician Services | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8) Rockingham Visiting Nurse Association & Hospice | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9) Participants(26) in June 2013 Community Forums in Raymond, Plaistow, Exeter, and Seabrook | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10) Respondents (3,409) to the May-Dec 2010, 2011, 2012, Jan-March 2013 UNH Household Telephone Survey | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11) Online surveys (384) participants | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12) Exeter Area Chamber of Commerce | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13) Community Resource Network | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14) Allies in Substance Abuse Prevention | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15) Exeter Fire Dept. and Town Health Officer | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16) With Open Arms | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17) School Nurses: Raymond High School, Lamprey River Elementary, Seabrook | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18) Service Link for Rockingham County | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19) Raymond School Resource Officer | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20) Seabrook School Guidance Counselor | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21) Child Advocacy Center | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22) The Housing Partnership | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23) City of Portsmouth Welfare Administrator | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24) Newmarket High School Principal | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 25) Exeter Adult Education | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please provide a description of the methods used to solicit community input on community needs (attach additional pages if necessary): In 2013, Lamprey Health Care worked with a group of community agencies to conduct a Community Needs Assessment (see the 2013 Exeter Area Community Needs Assessment submitted on our behalf by Exeter Health Resources).

In 2014, Lamprey Health Care worked with a group of community agencies to conduct a Community Needs Assessment (see the 2014 Working Together to Build a Healthier Greater Nashua Community Health Assessment submitted on our behalf by the Nashua Health Department).

The following methods were used to conduct the community wide needs assesment in LHC's Raymond and Newmarket Service Areas:

A) A random household telephone survey was conducted by the University of New Hampshire Survey Center.

B) Community Forums were held in Raymond, Plaistow, Exeter & Seabrook.

C) An online survey offered to employees of Exeter Hospital, Core Physicians, Rockingham VNA & Hospice, Families First Health and Support Center, SeaCare Health Services, United Way of the Greater Seacoast, Seacoast Mental Health Center and Lamprey Health Care. In total 384 people completed the survey including 31 physicians, 10 mid-level providers, 179 clinical staff members and 162 non-clinical employees.

D) Key Leader Interviews were conducted. Interviews of 42 Key Leaders were conducted in May and June of 2013. Many organizations are listed above. Additional particpants include: Newmarket Superintendent of Schools, Seacoast Public Health Region Public Health Coordinator, St. Vincent de Paul, Catholic Charities, Parish and Community Services for Rockingham/Stafford Counties, Dartmouth-Hitchcock Manchester Child Advocacy and Protection Program, Raymond Youth Coalition, Raymon School District After School Program, Big Brothers, Big Sisters, Child and Family Services, Raymond Welfare Officer, Kingston Human Services, Easter Seals Baby Steps Program Child Development Specialist, Raymond Middle School and Superintendent of Schools, Exeter Hospital Cancer Services.

E) Secondary resources to obtain demographic and other data regarding the health status of the communities we serve.

Community Organizations for the Nashua Needs Assessment

Community Health Institute/JSI

St. Joseph Healthcare

City of Nashua DPHCS

Southern New Hampshire Health System

Dartmouth Hitchcock - Nashua

Southern New Hampshire Health System

Merrimack School District

Greater Nashua Mental Health Center at CC

Nashua Regional Planning Commission

Rivier University

Lamprey Health Care -- Nashua Center

Harbor Care Health and Wellness Center

Nashua Community College

Nashua School District

Northeast Healthcare Quality Foundation

Gateways Community Services

United Way of Greater Nashua

Nashua Police Department

Nashua Pediatrics

Nashua Community College

Greater Nashua Dental Connection

Greater Nashua Chamber of Commerce

The following methods were used to conduct the community wide needs assesment in LHC's Nashua Service Area:

A) Focus Groups (109 participants) from residents in the City of Nashua and the twelve surrounding towns of Amherst, Brookline, Hollis, Hudson, Litchfield, Lyndeborough, Mason, Merrimack, Milford, Mont Vernon, Pelham and Wilton which included residents, key leaders and health care providers.

B) GIS Project using ArcGIS

C) Secondary Sources

Emergency Department and Inpatient Hospitalizations Database, NH Behavioral Risk Factor Surveillance System (BRFSS), NH Youth Risk Behavioral System (YRBS), NH Environmental Public Health Tracking Program / Environmental Health Data Integration Network (EHDIN); NH Trauma and Emergency Medical Services Information System (TEMSIS); CHA Subcommittee Data; US Census Bureau and many others.

Section 7: CHARITY CARE COMPLIANCE

| Please characterize the charity care policies and procedures of your organization according to the following: | YES | NO | Not Applicable |
|--|-------------------------------------|--------------------------|-------------------------------------|
| The valuation of charity does not include any bad debt, receivables or revenue | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Written charity care policy available to the public | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Any individual can apply for charity care | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Any applicant will receive a prompt decision on eligibility and amount of charity care offered | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Notices of policy in lobbies | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Notice of policy in waiting rooms | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Notice of policy in other public areas | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Notice given to recipients who are served in their home | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

List of Potential Community Needs for Use on Section 3

100 - Access to Care; General

- 101 - Access to Care; Financial Barriers
- 102 - Access to Care; Geographic Barriers
- 103 - Access to Care; Language/Cultural Barriers to Care
- 120 - Availability of Primary Care
- 121 - Availability of Dental/Oral Health Care
- 122 - Availability of Behavioral Health Care
- 123 - Availability of Other Medical Specialties
- 124 - Availability of Home Health Care
- 125 - Availability of Long Term Care or Assisted Living
- 126 - Availability of Physical/Occupational Therapy
- 127 - Availability of Other Health Professionals/Services
- 128 - Availability of Prescription Medications

200 - Maternal & Child Health; General

- 201 - Perinatal Care Access
- 202 - Infant Mortality
- 203 - Teen Pregnancy
- 204 - Access/Availability of Family Planning Services
- 206 - Infant & Child Nutrition
- 220 - School Health Services

300 - Chronic Disease – Prevention and Care; General

- 301 - Breast Cancer
- 302 - Cervical Cancer
- 303 - Colorectal Cancer
- 304 - Lung Cancer
- 305 - Prostate Cancer
- 319 - Other Cancer
- 320 - Hypertension/HBP
- 321 - Coronary Heart Disease
- 322 - Cerebrovascular Disease/Stroke
- 330 - Diabetes
- 340 - Asthma
- 341 - Chronic Obstructive Pulmonary Disease
- 350 - Access/Availability of Chronic Disease Screening Services

360 - Infectious Disease – Prevention and Care; General

- 361 - Immunization Rates
- 362 - STDs/HIV
- 363 - Influenza/Pneumonia
- 364 - Food borne disease
- 365 - Vector borne disease

370 - Mental Health/Psychiatric Disorders – Prevention and Care; General

371 - Suicide Prevention

372 - Child and adolescent mental health

372 - Alzheimer's/Dementia

373 - Depression

374 - Serious Mental Illness

400 - Substance Use; Lifestyle Issues

401 - Youth Alcohol Use

402 - Adult Alcohol Use

403 - Youth Drug Use

404 - Adult Drug Use

405 - Youth Tobacco Use

406 - Adult Tobacco Use

407 - Access/Availability of Alcohol/Drug Treatment

420 - Obesity

421 - Physical Activity

422 - Nutrition Education

430 - Family/Parent Support Services

500 – Socioeconomic Issues; General

501 - Aging Population

502 - Immigrants/Refugees

503 - Poverty

504 - Unemployment

505 - Homelessness

506 - Economic Development

507 - Educational Attainment

508 - High School Completion

509 - Housing Adequacy

520 - Community Safety & Injury; General

521 - Availability of Emergency Medical Services

522 - Local Emergency Readiness & Response

523 - Motor Vehicle-related Injury/Mortality

524 - Driving Under Influence

525 - Vandalism/Crime

526 - Domestic Abuse

527 - Child Abuse/Neglect

528 - Lead Poisoning

529 - Work-related injury

530 - Fall Injuries

531 - Brain Injury

532 - Other Unintentional Injury

533 - Air Quality
534 - Water Quality

600 - Community Supports; General

601 - Transportation Services
602 - Information & Referral Services
603 - Senior Services
604 - Prescription Assistance
605 - Medical Interpretation
606 - Services for Physical & Developmental Disabilities
607 - Housing Assistance
608 - Fuel Assistance
609 - Food Assistance
610 - Child Care Assistance
611 - Respite Care

999 - Other Community Need